#### **REQUEST FOR BOARD ACTION**

#### HENDERSON COUNTY BOARD OF COMMISSIONERS

| <b>MEETING DATE:</b> | February 3, 2025                                  |
|----------------------|---|
| SUBJECT:             | American Rescue Plan – Approved Projects Update   |
| PRESENTER:           | Samantha R. Reynolds, Financial Services Director |
| ATTACHMENTS:         | Yes   |
| ATTACHMENTS,         | 1. SLFRF Compliance Report                        |

#### **SUMMARY OF REQUEST:**

Attached for the Board's review and approval is the American Rescue Plan State and Local Fiscal Recovery Funds (SLFRF) Compliance Report as of December 31, 2024. The update includes all approved projects to be funded by American Rescue Plan funds with the amount of funds currently encumbered and expended. Amounts expended and encumbered have been reported to the US Department of the Treasury via a State and Local Government Fiscal Recovery Funds Compliance Report for Quarter 4 2024.

#### **BOARD ACTION REQUESTED:**

Request that the Board consider approving the December 31, 2024, American Rescue Plan compliance report as presented.

Suggested Motion:

I move that the Board of Commissioners approve the December 31, 2024 American Rescue Plan compliance report as presented.

# **Recipient Profile**

#### **Recipient Information**

| Recipient UEI                           | EXFKXBHH7EG7  |
|---|---|
| Recipient TIN                           | 566000307   |
| Recipient Legal Entity Name             | Henderson County, North Carolina  |
| Recipient Type                          | Metro City or County  |
| FAIN                                    |   |
| CFDA No./Assistance Listing             |   |
| Recipient Address                       | 113 North Main Street   |
| Recipient Address 2                     |   |
| Recipient Address 3                     |   |
| Recipient City                          | Hendersonville  |
| Recipient State/Territory               | NC  |
| Recipient Zip5                          | 28792   |
| Recipient Zip+4                         |   |
| Recipient Reporting Tier                | Tier 2. Metropolitan cities and counties with a population<br>below 250,000 residents that are allocated more than \$10<br>million in SLFRF funding, and NEUs that are allocated<br>more than \$10 million in SLFRF funding |
| Base Year Fiscal Year End Date          | 6/30/2024   |
| Discrepancies Explanation               |   |
| Is the Recipient Registered in SAM.Gov? | Yes   |

# **Project Overview**

| Up to and including this reporting period, have revenue<br>replacement funds been allocated to government services<br>and reflected in the below projects? | Yes |
|--|-----|
|--|-----|

## Project Name: ALL INCLUSIVE PLAYGROUND - JACKSON PARK

| Project Identification Number   | 2056  |
|---------------------------------|---|
| Project Expenditure Category    | 6-Revenue Replacement                                     |
| Project Expenditure Subcategory | 6.1-Provision of Government Services                      |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$400,000.00  |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$400,000.00  |
| Total Cumulative Expenditures   | \$400,000.00  |
| Current Period Obligations      |   |
| Current Period Expenditures     |   |
| Project Description             | Handicap accessible playground equipment in Jackson Park. |

# Project Name: MILLS RIVER TOWER UPGRADE

| Project Identification Number   | 9052  |
|---------------------------------|---|
| Project Expenditure Category    | 6-Revenue Replacement   |
| Project Expenditure Subcategory | 6.1-Provision of Government Services                                |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$302,424.80  |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$302,424.80  |
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations      | \$274,124.80  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | Upgrade cell tower in Mills River, NC for emergency communications. |

#### Project Name: SELF-INSURANCE REIMBURSEMENT

| Project Identification Number   | 9050   |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.6-Medical Expenses (including Alternative Care Facilities) |
| Status To Completion            | Completed  |

| Adopted Budget  | \$559,822.00  |
|---|---|
| Program Income Earned   | \$0.00  |
| Program Income Expended   | \$0.00  |
| Total Cumulative Obligations  | \$559,822.00  |
| Total Cumulative Expenditures   | \$559,822.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | This project is to reimburse Henderson County's self<br>insurance fund for claims paid out related to COVID-19<br>expenses. |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This project reimburses Henderson County's self insurance<br>fund for coverage paid out related to COVID-19 claims.         |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All reimbursements made to the County's self insurance fund<br>were related to direct COVID-19 insurance claims.            |

## Project Name: FOSTER CARE SERVICES

| Project Identification Number   | 9047  |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.13-Healthy Childhood Environments: Services to Foster<br>Youth or Families Involved in Child Welfare System                   |
| Status To Completion  | Completed   |
| Adopted Budget  | \$348,000.00  |
| Program Income Earned   | \$0.00  |
| Program Income Expended   | \$0.00  |
| Total Cumulative Obligations  | \$348,000.00  |
| Total Cumulative Expenditures   | \$348,000.00  |
| Current Period Obligations  |   |
| Current Period Expenditures   |   |
| Project Description   | To reimburse Henderson County for expenses incurred for foster care services during the COVID19 pandemic.                       |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | These funds are to reimburse Henderson County for<br>expenses incurred for foster care services during the<br>COVID19 pandemic. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | These funds are to reimburse Henderson County for<br>expenses incurred for foster care services during the<br>COVID19 pandemic. |

## Project Name: BROADBAND GREAT GRANT FUNDING

| Project Identification Number                  | 9070   |
|--|--|
| Project Expenditure Category                   | 5-Infrastructure   |
| Project Expenditure Subcategory                | 5.21-Broadband: Other projects   |
| Status To Completion                           | Completed less than 50%  |
| Adopted Budget                                 | \$100,000.00   |
| Program Income Earned                          | \$0.00   |
| Program Income Expended                        | \$0.00   |
| Total Cumulative Obligations                   | \$100,000.00   |
| Total Cumulative Expenditures                  | \$50,000.00  |
| Current Period Obligations                     | \$0.00   |
| Current Period Expenditures                    | \$0.00   |
| Project Description                            | To provide broadband to unserved or underserved areas within Henderson County. |
| Projected/actual construction start date       | 11/15/2023   |
| Projected/actual initiation of operations date | 11/15/2024   |

### Project Name: EDNEYVILLE SEWER COLLECTION SYSTEM

| Project Identification Number  | 2059  |
|--|---|
| Project Expenditure Category   | 5-Infrastructure  |
| Project Expenditure Subcategory  | 5.2-Clean Water: Centralized wastewater collection and conveyance |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$1,050,982.00  |
| Program Income Earned  | \$0.00  |
| Program Income Expended  | \$0.00  |
| Total Cumulative Obligations   | \$1,050,982.00  |
| Total Cumulative Expenditures  | \$573,224.85  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$85,000.00   |
| Project Description  | Sewer Collection System for Edneyville Community.                 |
| Projected/actual construction start date                                 | 12/31/2023  |
| Projected/actual initiation of operations date                           | 12/31/2026  |
| Location Type(for broadband, geospatial location data)                   | Address   |
| Location Details   | Edneyville/Cane Creek Community                                   |
| Public Water System (PWS) ID Number                                      | n/a   |
| National Pollutant Discharge Elimination System (NPDES)<br>Permit Number | Pending   |
| Median Household Income of service area                                  | \$65,508.00   |

## **Project Name: RECREATION SPORTS COMPLEX**

| Project Identification Number   | 9089   |
|---------------------------------|--|
| Project Expenditure Category    | 6-Revenue Replacement  |
| Project Expenditure Subcategory | 6.1-Provision of Government Services   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$2,682,436.95   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$2,682,436.95   |
| Total Cumulative Expenditures   | \$187,250.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | Multi-field sports complex, including permitting, site development and construction. |

### **Project Name: RECREATION SPORTS COMPLEX**

| Project Identification Number   | 9069-2   |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety                    |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$9,196,433.14   |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$9,196,433.14   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Multi-field sports complex, including permitting, site development and construction.                     |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$9,196,433.14   |
| Type of capital expenditures, based on the following enumerated uses  | Parks, green spaces, recreational facilities, sidewalks  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 15 Dis Imp HHs and populations residing in Qualified<br>Census Tracts                                    |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | Soccer Fields, Tennis Courts, and parking for park facilities to serve surrounding areas, including QCT. |

#### **Project Name: APPLE RIDGE HOUSING COMPLEX**

| 9069   |
|--|
| 5-Infrastructure   |
| 5.2-Clean Water: Centralized wastewater collection and conveyance  |
| Completed less than 50%  |
| \$1,500,000.00   |
| \$0.00   |
| \$0.00   |
| \$1,500,000.00   |
| \$0.00   |
| \$1,500,000.00   |
| \$0.00   |
| Crucial water and sewer infrastructure for Apple Ridge<br>affordable housing project. The Housing Assistance<br>Corporation intends to construct 60 apartments and 20 single<br>family homes across 19 acres between Sugarloaf and East<br>Prince roads, just off interstate 26. |
| 8/5/2024   |
| 12/31/2026   |
| Address Range  |
| 19 acres between Sugarloaf and East Prince Roads off<br>Interstate 26.   |
| Pending  |
| Pending  |
| \$0.00   |
| \$0.00   |
|  |

#### Project Name: STRYKER POWER LOAD SYSTEMS

| Project Identification Number   | 9043                                 |
|---------------------------------|--------------------------------------|
| Project Expenditure Category    | 6-Revenue Replacement                |
| Project Expenditure Subcategory | 6.1-Provision of Government Services |
| Status To Completion            | Completed                            |
| Adopted Budget                  | \$115,138.25                         |
| Program Income Earned           | \$0.00                               |
| Program Income Expended         | \$0.00                               |
| Total Cumulative Obligations    | \$115,138.25                         |

| Total Cumulative Expenditures | \$115,138.25  |
|-------------------------------|---|
| Current Period Obligations    | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description           | Stryker Power-LOAD Cot Fasteners are intended to aid in<br>the loading and unloading of patients within ambulances.<br>For use within Emergency Medical Service ambulances. |

### Project Name: FLETCHER EMS STATION

| Project Identification Number   | 9027                                 |
|---------------------------------|--------------------------------------|
| Project Expenditure Category    | 6-Revenue Replacement                |
| Project Expenditure Subcategory | 6.1-Provision of Government Services |
| Status To Completion            | Completed less than 50%              |
| Adopted Budget                  | \$2,300,000.00                       |
| Program Income Earned           | \$0.00                               |
| Program Income Expended         | \$0.00                               |
| Total Cumulative Obligations    | \$2,300,000.00                       |
| Total Cumulative Expenditures   | \$2,300,000.00                       |
| Current Period Obligations      | \$56,344.47                          |
| Current Period Expenditures     | \$145,615.03                         |
| Project Description             | Construction of Fletcher EMS Station |

#### Project Name: VFW RENOVATION AND REPAIR

| Project Identification Number   | 9040   |
|---------------------------------|--|
| Project Expenditure Category    | 6-Revenue Replacement  |
| Project Expenditure Subcategory | 6.1-Provision of Government Services   |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$4,200,000.00   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$4,200,000.00   |
| Total Cumulative Expenditures   | \$4,200,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | Costs associated with the renovation and repair of the VFW building in Henderson County. |

### Project Name: ADVENT HEALTH - MONOCLONAL INFUSION CLINIC

| Project Identification Number   | 9032   |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.6-Medical Expenses (including Alternative Care Facilities) |
|                                 |  |

| Status To Completion  | Completed   |
|---|---|
| Adopted Budget  | \$18,247.69   |
| Program Income Earned   | \$0.00  |
| Program Income Expended   | \$0.00  |
| Total Cumulative Obligations  | \$18,247.69   |
| Total Cumulative Expenditures   | \$18,247.69   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19.  |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | These funds are to assist hospital in providing monoclonal<br>antibody infusion medical care to appropriate patients<br>suffering from COVID-19. Contract provides funding for<br>hospital staff and contracted services dedicated to infusion<br>clinic. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | These funds are to assist hospital in providing monoclonal<br>antibody infusion medical care to appropriate patients<br>suffering from COVID-19. Contract provides funding for<br>hospital staff and contracted services dedicated to infusion<br>clinic. |

## Project Name: PARDEE HOSPITAL - MONOCLONAL INFUSION CLINIC

| Project Identification Number   | 9031   |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.6-Medical Expenses (including Alternative Care Facilities)   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$33,391.17  |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$33,391.17  |
| Total Cumulative Expenditures   | \$33,391.17  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve? | 1 Imp General Public   |
|   | These funds are to assist hospital in providing monoclonal   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | antibody infusion medical care to appropriate patients<br>suffering from COVID-19. Contract provides funding for<br>hospital staff and contracted services dedicated to infusion<br>clinic.   |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | These funds are to assist hospital in providing monoclonal<br>antibody infusion medical care to appropriate patients<br>suffering from COVID-19. Contract provides funding for<br>hospital staff and contracted services dedicated to infusion<br>clinic. |

# **Subrecipients**

## Subrecipient Name: CHARTER COMMUNICATIONS

| TIN                                     | 454608839               |
|---|-------------------------|
| Unique Entity Identifer                 | FKP2W71T9GK7            |
| POC Email Address                       |                         |
| Address Line 1                          | 12405 POWERSCOURT DRIVE |
| Address Line 2                          | ST LOUIS                |
| Address Line 3                          |                         |
| City                                    | ST LOUIS                |
| State                                   | МО                      |
| Zip                                     | 63131                   |
| Zip+4                                   |                         |
| Entity Type                             | Contractor              |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

#### Subrecipient Name: Housing Assistance Corporation

| TIN                                     | 581831757                       |
|---|---------------------------------|
| Unique Entity Identifer                 | NL8JZHCYFHP7                    |
| POC Email Address                       | margaret@housing-assistance.com |
| Address Line 1                          | 214 North King Street           |
| Address Line 2                          |                                 |
| Address Line 3                          |                                 |
| City                                    | Hendersonville                  |
| State                                   | NC                              |
| Zip                                     | 28792                           |
| Zip+4                                   |                                 |
| Entity Type                             | Subrecipient                    |
| Is the Recipient Registered in SAM.Gov? | Yes                             |

#### Subrecipient Name: WGLA ENGINEERING PLLC

| TIN                     |                     |
|-------------------------|---------------------|
| Unique Entity Identifer | N8EHZATMVBJ8        |
| POC Email Address       |                     |
| Address Line 1          | 724 5TH AVENUE WEST |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | HENDERSONVILLE      |
|                         |                     |

| State                                   | NC         |
|---|------------|
| Zip                                     | 28739      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

# Subawards

#### Subward No: 9070

| Subaward Type                  | Contract: Definitive Contract   |
|--------------------------------|---|
| Subaward Obligation            | \$100,000.00  |
| Subaward Date                  | 11/15/2023  |
| Place of Performance Address 1 | Hendersonville  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Hendersonville  |
| Place of Performance State     | NC  |
| Place of Performance Zip       | 28792   |
| Place of Performance Zip+4     |   |
| Description                    | Henderson County has had one internet service provider,<br>Charter/Spectrum, successfully received GREAT Grant<br>funding. The contract outlines Henderson County's<br>responsibility as supporting the application with \$100,000 in<br>ARP funds as matching dollars towards the project. |
| Subrecipient                   | CHARTER COMMUNICATIONS  |
| Period of Performance Start    | 11/15/2023  |
| Period of Performance End      | 9/20/2028   |
|                                |   |

#### Subward No: 2059

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$1,050,982.00  |
| Subaward Date                  | 6/8/2022  |
| Place of Performance Address 1 | 1 Historic Courthouse Square  |
| Place of Performance Address 2 | Suite 1   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Hendersonville  |
| Place of Performance State     | NC  |
| Place of Performance Zip       | 28791   |
| Place of Performance Zip+4     |   |
| Description                    | Edneyville Sewer Collection System was Board approved,<br>eligible via 5.2 - Clean Water: Centralized Wastewater<br>Collection. Services provides are for engineering related to<br>design, permitting and archeological services for the sewer<br>collection system. |
| Subrecipient                   | WGLA ENGINEERING PLLC   |
| Period of Performance Start    | 6/8/2022  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 9069

| Subaward Type                  | Direct Payment  |
|--------------------------------|---|
| Subaward Obligation            | \$1,500,000.00  |
| Subaward Date                  | 8/5/2024  |
| Place of Performance Address 1 | Sugarloaf and Prince Roads, Hendersonville  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Hendersonville  |
| Place of Performance State     | NC  |
| Place of Performance Zip       | 28792   |
| Place of Performance Zip+4     |   |
| Description                    | To fund crucial water and sewer infrastructure for the Apple<br>Ridge affordable housing project. |
| Subrecipient                   | Housing Assistance Corporation  |
| Period of Performance Start    | 8/5/2024  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 278

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$250,000.00   |
| Subaward Date                  | 8/18/2021  |
| Place of Performance Address 1 | Pardee Hospital  |
| Place of Performance Address 2 | 800 North Justice Street   |
| Place of Performance Address 3 |  |
| Place of Performance City      | Hendersonville   |
| Place of Performance State     | NC   |
| Place of Performance Zip       | 28791  |
| Place of Performance Zip+4     |  |
| Description                    | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19. Contract provides funding for hospital staff and<br>contracted services dedicated to infusion clinic. |
| Subrecipient                   | a2Wt000000sm6S   |
| Period of Performance Start    | 8/25/2021  |
| Period of Performance End      | 12/31/2022   |
| Primary Sector                 | health care  |
| Purpose of Funds               | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19. Contract provides funding for hospital staff and<br>contracted services dedicated to infusion clinic. |

#### Subward No: 262

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$250,000.00   |
| Subaward Date                  | 9/15/2021  |
| Place of Performance Address 1 | Advent Health  |
| Place of Performance Address 2 | 100 Hospital Drive   |
| Place of Performance Address 3 |  |
| Place of Performance City      | Hendersonville   |
| Place of Performance State     | NC   |
| Place of Performance Zip       | 28792  |
| Place of Performance Zip+4     |  |
| Description                    | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19. Contract provides funding for hospital staff and<br>contracted services dedicated to infusion clinic. |
| Subrecipient                   | a2Wt000000sm6X   |
| Period of Performance Start    | 10/18/2021   |
| Period of Performance End      | 12/31/2022   |
| Primary Sector                 | health care  |
| Purpose of Funds               | To assist hospital in providing monoclonal antibody infusion<br>medical care to appropriate patients suffering from<br>COVID-19. Contract provides funding for hospital staff and<br>contracted services dedicated to infusion clinic. |

# Expenditures

#### Expenditures for Awards more than \$50,000

### Expenditure: EN-01976643

| Project Name       | BROADBAND GREAT GRANT FUNDING |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0850146                   |
| Subaward No        | 9070                          |
| Subaward Amount    | \$100,000.00                  |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | CHARTER COMMUNICATIONS        |
| Expenditure Start  | 11/30/2023                    |
| Expenditure End    | 11/30/2023                    |
| Expenditure Amount | \$50,000.00                   |

## Expenditure: EN-02232166

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 5/22/2024                          |
| Expenditure End    | 5/22/2024                          |
| Expenditure Amount | \$33,160.00                        |

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 6/3/2024                           |
| Expenditure End    | 6/3/2024                           |
| Expenditure Amount | \$15,940.00                        |

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 6/30/2024                          |
| Expenditure End    | 6/30/2024                          |
| Expenditure Amount | \$76,180.00                        |

## Expenditure: EN-02232169

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 4/24/2024                          |
| Expenditure End    | 4/24/2024                          |
| Expenditure Amount | \$20,440.00                        |

### Expenditure: EN-02354248

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 8/21/2024                          |
| Expenditure End    | 8/21/2024                          |
| Expenditure Amount | \$34,300.00                        |

| Project Name | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------|------------------------------------|
| Subaward ID  | SUB-0924659                        |
|              |                                    |

| Subaward No        | 2059                     |
|--------------------|--------------------------|
| Subaward Amount    | \$1,050,982.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | WGLA ENGINEERING PLLC    |
| Expenditure Start  | 8/8/2024                 |
| Expenditure End    | 8/8/2024                 |
| Expenditure Amount | \$43,160.00              |

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 11/20/2024                         |
| Expenditure End    | 11/20/2024                         |
| Expenditure Amount | \$25,000.00                        |

## Expenditure: EN-02418976

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 12/31/2024                         |
| Expenditure End    | 12/31/2024                         |
| Expenditure Amount | \$25,000.00                        |

| Project Name      | EDNEYVILLE SEWER COLLECTION SYSTEM |
|-------------------|------------------------------------|
| Subaward ID       | SUB-0924659                        |
| Subaward No       | 2059                               |
| Subaward Amount   | \$1,050,982.00                     |
| Subaward Type     | Contract: Purchase Order           |
| Subrecipient Name | WGLA ENGINEERING PLLC              |
|                   |                                    |

| Expenditure Start  | 10/15/2024  |
|--------------------|-------------|
| Expenditure End    | 10/15/2024  |
| Expenditure Amount | \$20,000.00 |

| Project Name       | EDNEYVILLE SEWER COLLECTION SYSTEM |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0924659                        |
| Subaward No        | 2059                               |
| Subaward Amount    | \$1,050,982.00                     |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | WGLA ENGINEERING PLLC              |
| Expenditure Start  | 10/29/2024                         |
| Expenditure End    | 10/29/2024                         |
| Expenditure Amount | \$15,000.00                        |

#### Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-02036150

| Project Name                    | EDNEYVILLE SEWER COLLECTION SYSTEM |
|---------------------------------|------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments       |
| Total Period Expenditure Amount | \$265,044.85                       |
| Total Period Obligation Amount  | \$0.00                             |

Expenditure: EN-02420700

| Project Name                    | RECREATION SPORTS COMPLEX      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$0.00                         |
| Total Period Obligation Amount  | \$9,196,433.14                 |

#### Expenditure: EN-02418854

| Project Name                    | PARDEE HOSPITAL - MONOCLONAL INFUSION<br>CLINIC |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                    |
| Total Period Expenditure Amount | \$0.00  |
| Total Period Obligation Amount  | (\$216,608.83)                                  |

| Project Name               | PARDEE HOSPITAL - MONOCLONAL INFUSION<br>CLINIC |
|----------------------------|---|
| Subaward Type (Aggregates) | Aggregate of Direct Payments                    |
|                            |   |

| Total Period Expenditure Amount | \$33,391.17 |
|---------------------------------|-------------|
| Total Period Obligation Amount  | \$0.00      |

| Project Name                    | PARDEE HOSPITAL - MONOCLONAL INFUSION<br>CLINIC |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                    |
| Total Period Expenditure Amount | \$0.00  |
| Total Period Obligation Amount  | \$0.00  |

Expenditure: EN-02418871

| Project Name                    | ADVENT HEALTH - MONOCLONAL INFUSION<br>CLINIC |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                  |
| Total Period Expenditure Amount | \$0.00  |
| Total Period Obligation Amount  | (\$231,752.31)                                |

Expenditure: EN-00025494

| Project Name                    | ADVENT HEALTH - MONOCLONAL INFUSION<br>CLINIC |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                  |
| Total Period Expenditure Amount | \$18,247.69                                   |
| Total Period Obligation Amount  | \$0.00  |

### **Payments To Individuals**

Expenditure: EN-00894243

| Project Name                    | SELF-INSURANCE REIMBURSEMENT |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$559,822.00                 |
| Total Period Obligation Amount  | \$559,822.00                 |

| Project Name                    | FOSTER CARE SERVICES |
|---------------------------------|----------------------|
| Total Period Expenditure Amount | \$348,000.00         |
| Total Period Obligation Amount  | \$348,000.00         |

# Report

## **Revenue Replacement**

| Is your jurisdiction electing to use the standard allowance of<br>up to \$10 million, not to exceed your total award allocation,<br>for identifying revenue loss? | Yes  |
|---|--|
| Revenue Loss Due to Covid-19 Public Health Emergency  | \$10,000,000.00  |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?  | No   |
| Please provide an explanation of how revenue replacement<br>funds were allocated to government services   | Revenue replacement funds have been tentatively allocated<br>to fund a VFW renovation project, an EMS base project, a<br>cell tower upgrade, Stryker Power load systems for EMS,<br>an All Inclusive Playgroup Project and a Recreation Sports<br>Complex. |

# Overview

| Total Obligations            | \$22,806,876.00 |
|------------------------------|-----------------|
| Total Expenditures           | \$8,785,073.96  |
| Total Adopted Budget         | \$22,806,876.00 |
| Total Number of Projects     | 14              |
| Total Number of Subawards    | 5               |
| Total Number of Expenditures | 20              |

| Have you expended \$750,000 or more in federal award funds during your most recently completed fiscal year?  | Yes |
|--|-----|
| Have you submitted a single audit or program specific audit report to the Federal Audit Clearinghouse (FAC)? | Yes |

# Certification

| Authorized Representative Name      | SAMANTHA REYNOLDS               |
|-------------------------------------|---------------------------------|
| Authorized Representative Telephone | (828) 697-4821                  |
| Authorized Representative Title     | Finance Director                |
| Authorized Representative Email     | sreynolds@hendersoncountync.gov |
| Submission Date                     | 1/23/2025 2:12 PM               |